1331172

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

PURSUANT TO REGULATION D.	ı
SECTION 4(6), AND/OR	DATE RECEIVED
UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	RECEIVED
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	JUN 2 2 2005
A. BASIC IDENTIFICATION DATA	West 1851
1. Enter the information requested about the issuer	153/8
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) HardKore, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
11314 East I-80, Cheyenne, WY 82009	307-632-3684
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same	Telephone Number (Including Area Code)
Brief Description of Business	
Type of Business Organization Corporation limited partnership, already formed other (processes trust limited partnership, to be formed	please specify): PROCESSEE JUL 0 1 2005
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: O 2 9 3 Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	THOMSON FINANCIAL
GENERAL INSTRUCTIONS	

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC IDE	ENTIFICATION DATA		
2. Enter the information re	quested for the fol	llowing:			
 Each promoter of the 	he issuer, if the iss	suer has been organized w	ithin the past five years;		
Each beneficial own	ner having the pow	er to vote or dispose, or dir	ect the vote or disposition	of. 10% or more of	a class of equity securities of the issuer.
• Each executive offi	icer and director o	f corporate issuers and of	corporate general and mai	naging partners of	partnership issuers; and
 Each general and m 	nanaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Reneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Brendle, Douglas	i individual)				
Business or Residence Address Business: 11314 East I-8	•		ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	individual)	•			
Carnevale, Anthony					
Business or Residence Address	ss (Number and	Street, City, State, Zip Co	odc)		
Business: 11314 East I-80	, Cheyenne, W	Y 82009			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Hinker, Liana	(individual)				
Business or Residence Address	s (Number and	Street, City, State, Zip Co	ode)	****	
Business: 11314 East I-80), Cheyenne, W	Y 82009			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)			· · · · · · · · · · · · · · · · · · ·	
Ross, Vincent J.					
Business or Residence Address Business: 5307 Yellowsto		Street, City, State, Zip Co nne, WY 82009	dc)		
Check Box(cs) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	s (Number and	Street, City, State, Zip Co	dc)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	s (Number and	Street, City, State, Zip Co.	de)		
Check Hox(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	s (Number and S	Street, City, State, Zip Co.	dei		
	(Lien blan	ik sheet, or copy and use a	additional confine of this of	neel ac necessary	
	(CSC DIAN	in ameed or exply and use a	mantionial copies of this st	ioot, as necessary)	

					ъ. ј	NFORMAT	ION ABOU	T OFFERI	ING				
1	Here the	iconos val	d or door t	ha issuer i	ntund to co	il to non-	weredited.	invoctore i	n this Affer	ino?		Yes	No
1.	rias inc	: ISSUEL SUI	u. or does t			Appendix					•••••••	<u> </u>	L.
2.	What is	the minim	num investr									s 56	2.00
												Yes	No
3.													
4.	or state	ssion or sim son to be lis s. list the n	iilar remune sted is an as	eration for a sociated pe proker or d	solicitation erson or agr caler. If m	of purchas ent of a brol ore than fiv	ers in conn ker or deald e (5) perso	ection with or registere ns to be list	sales of se d with the ! ted are asso	curities in t SEC and/or	hirectly, any the offering, with a state sons of such		
Ful N/	•	Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	iumber an	d Street. C	ity. State. 2	Zip Code)						
Nai	ne of As	sociated B	roker or De	aler				***************************************		, , , , , , , , , , , , , , , , , , , 			
Sta	les in Wi	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individua	States)		******************************			······		□ A1	Il States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first. if ind	ividual)									
Bus	iness or	Residence	Address (1	Number an	d Street, C	City. State.	Zip Code)						
Nar	ne of As	sociated Br	oker or De	aler	· · · · · · · · · · · · · · · · · · ·								
Stat	les in Wi	nich Persor	Listed Ha	s Solicited	or intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)	******	•••••		••••••		*******	☐ Al	Il States
	AL IL MT RI	AK IN NE SC	AZ JA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WY	GA MN OK W1	HI MS OR WY	MO PA PR
Full	Name (Last name	first, if ind	ividual)				······································		······································		······································	
Bus	iness or	Residence	Address (7	Number an	d Street, C	ity. State.	Zip Code)						
Nan	ne of Ass	sociated Br	oker or De	aler									
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)	•••••••••••			**********		••••••	☐ Al	States
	AI. II. MT	IN NE SC	IA NV SD	AR KS NH TK	CA KY NJ TX	CO LA NM LT	ME NY VI	MD NC VA	DC MA ND WA	FL MI OH	MN OK WI	MS OR WY	MO PA

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

١.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Dcbt		\$
	Equity	§_3,062.00	\$_3,062.00
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	S
	Other (Specify)		
	Total	\$_3,062.00	s 3,062.00
	Answer also in Appendix, Column 3, if filing under ULOE,		
4 ·	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$
	Non-accredited Investors	2	\$_3,062.00
	Total (for filings under Rule 504 only)	2	\$_3,062.00
	Answer also in Appendix. Column 4. if filing under UI.OE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	common equity	\$ 385,580.00
	Total		\$ 385,580.00
1	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$_600.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	_	\$
	Total		s 600.00

	b. Enter the difference between the aggregate off and total expenses furnished in response to Part C - proceeds to the issuer."		SS SS	2,462.00 \$	
5.	Indicate below the amount of the adjusted gross peach of the purposes shown. If the amount for check the box to the left of the estimate. The total proceeds to the issuer set forth in response to Pa	any purpose is not known, furnish an estimate ar of the payments listed must equal the adjusted gro	nd		
			Payments to Officers. Directors. & Affiliates	Payments to Others	
	Salaries and fees		[] \$	s	
	Purchase of real estate			s	
	Purchase, rental or leasing and installation of m and equipment		 \$	□ s	
	Construction or leasing of plant buildings and for		_		
	Acquisition of other businesses (including the v offering that may be used in exchange for the as issuer pursuant to a merger)	alue of securities involved in this sets or securities of another	_		
	Repayment of indebtedness				
	Working capital				
	Other (specify):				
				- L.J.P	
			\$	s	
	Column Totals		<u>\$</u> 0.00	S 2,462.00	
	Total Payments Listed (column totals added)		<u> </u>	,462.00	
:				Commission of the second	
ħŧ	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to f	urnish to the U.S. Securities and Exchange Comm	nission, upon writte		
ne	information furnished by the issuer to any non-action (Print or Type)	Signature 1 1 1	Date		
ssı		Signature / / /	1	5	
ssi Ha	per (Print or Type)		Date 6/21/0	5	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE		
1.	• • •	30.262 presently subject to any of the disqual		
		See Appendix, Column 5, for state response	onse.	
2.	The undersigned issuer hereby under D (17 CFR 239,500) at such times	ertakes to furnish to any state administrator of ar as required by state law.	ny state in which this notice is filed a notice on	Form
3.	The undersigned issuer hereby und issuer to offerees.	lertakes to furnish to the state administrators.	upon written request, information furnished	by the
4.	limited Offering Exemption (ULO)	that the issuer is familiar with the conditions to b) of the state in which this notice is filed and to f establishing that these conditions have been	inderstands that the issuer claiming the availa	
	uer has read this notification and know thorized person.	is the contents to be true and has duly caused this	s notice to be signed on its behalf by the unders	signed
Issuer ((Print or Type)	Signature	Date	
HardKo	pre, Inc.	Allal	6/21/05	
Name (Print or Type)	Title (Print or Type)		

President

Instruction.

Anthony Carnevale

Prim the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 3 Disqualification under State ULOE Type of security (if yes, attach and aggregate Intend to sell explanation of offering price Type of investor and to non-accredited waiver granted) offered in state amount purchased in State investors in State (Part E-Item 1) (Part C-Item 1) (Part C-Item 2) (Part B-Item 1) Number of Number of Non-Accredited Accredited Yes No Investors Amount Investors Amount Yes No State ALΑK AZAR CA 35,000 CO X \$2,500.00 СТ DE DC FL $\mathsf{G}\mathsf{A}$ HI ID IL IN IA ĸs KYLA ME MD MA MI MN MS

				APP	ENDIX				
1	Intend to non-a investor	2 d to sell accredited rs in State i-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOI (if yes. attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
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				APP	ENDIX				
I		2 d to sell	3 Type of security and aggregate		4				
	investo	accredited rs in State 3-Item 1)	offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited			Yes	No
WY	×		common stock 350,580			1	\$562.00	,	
PR									